DATENT	ADDI ICATION	FEE DETERMINA	ATION RECORI	n
PAICNI	AFFLICATION	CCC DE LENWINA	ALIUN RECURI	_

Effective October 1, 2000

Application or Docket Number

GENE1400-2

CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY					
TOTAL CLAIMS		80		and the second			RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		60 minus 20=		• 60			X\$ 9=	540	OR	X\$18=		
IND	EPENDENT CL	AIMS	3 minus 3 = *		* Ø			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PI			RESENT	ENT /			+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL	295	OR	TOTAL			
CLAIMS AS AMENDED - PART II								TOTAL	(Q.J.)	JON	OTHER	THAN
		(Column 1)	(Column 2) (Column 3)		_	SMALL E	ENTITY	OR	SMALL			
AMENDMENT A	<i>,</i> ·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	* '	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	-	=		X40=		OR	X80=	-
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		<u> </u>	+135=		OR	+270=	
						٠		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI TIONAL FEE	1 200	RATE	ZADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ٍ ل	+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	_	(Column 1)			ımn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		i	X80=	
	FIRST PRESE	NTATION OF M	IULTIPLE DEI	PENDEN	T CLAIN	1				OR	<u> </u>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**	** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
		The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										